

SAME DAY APPOINTMENT SCHEDULING

Health Center

SUBJECT: Same-Day Appointments Scheduling
EFFECTIVE DATE: [REDACTED] APPROVED BY: [REDACTED]
REVIEW DATE: [REDACTED] PAGES: 3
REVISED DATE/BY: [REDACTED]

I. POLICY

It is the policy of the Practice to accommodate same-day appointment requests whenever possible. Each calendar working day, the clinic will have at least 30 minutes of open appointment for an established patient's acute/urgent care needs.

The triage team will be skilled, trained staff to determine if the patient's condition and needs are emergent, acute/urgent or routine by the information provided by the patient or person making the appointment. If the triage team requires assistance to determine the patient's health status, they will contact the provider on call prior to scheduling.

Further it is the policy of the Practice to measure this policy for meeting compliance standards set by the regulating agency and patient satisfaction for patient service.

II. PURPOSE

To facilitate easy access to the patient's personal clinician for acute/urgent healthcare needs.

To facilitate the same-day appointment process to assist patients in scheduling of their appointments.

To facilitate the urgency of the appointment needed by triaging patients by illness/disease/complaint.

III. PROCEDURES

Acute/urgent care definitions, scenarios and scripts have been developed in advance of implementing this policy. Staff trainings relating to this policy are recorded in the [REDACTED] Staff Training Log.

Patients requesting same-day appointments should be handled in the most appropriate manner, according to the following steps:

1. When answering the phone request the patient to identify his/her primary physician. The patient will be accessed by the triage staff into one of three categories: emergent, acute or routine.

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2. If the same-day appointment request is an emergency, instruct the patient to immediately proceed to the nearest emergency room. Document the instructions in the patient's chart.
3. If the appointment is routine, offer the patient an appointment within 5 working days. Communicate to the patient the time he or she should present.
4. If the patient's illness/disease and needs are determined to be acute/urgent, schedule the patient in the first available appointment slot with their own provider, if possible.

Note to practices: A minimum of 30 minutes of walk-in / same day / urgent / acute care time must be available per clinic site. A feasible solution is to divide the time into 15 minutes in the morning and 15 in the afternoon. Morning and early afternoon patients go in the afternoon slots. All acute/urgent calls after 3 pm might be scheduled for an appointment for the next day.

5. If the patient's health status is not able to be determined at the time of the call, the triage staff will contact the physician for assistance in classifying the patient's condition. The physician will respond to the triage staff within 1 hour. Return phone calls will be made to the patient within 4 hours of the original call.
6. Walk-in patients will be triaged for appointments. If the patient is in an emergent situation the clinical staff will respond immediately to the patient for assessment.
7. Clinical staff will have access (online or paper) to the daily schedule for communication of the daily patient load.
8. All calls will be documented in a patient call-in report for documenting the administrative outcome of the patient interaction. Minimal data to be included will be the time the call was received, the time the call was returned, and the disposition of the encounter.

IV. DISTRIBUTION

This policy must be distributed to all scheduling personnel via email. A teleconference/or on-site training will be provided to review this policy.

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This policy will be communicated to all established patients who require on-going care within the clinic. A copy of the written policy will be provided to each patient upon checking out of the clinic.

All recipients of this policy must acknowledge their receipt and understanding of the policy by referring any questions or problems with the policy within ten days of the issue date to their immediate supervisor. If no questions or problems are stated, it will be assumed that the policy has been read and understood.

All questions regarding this policy or its implementation may be referred your immediate supervisor.

Sample Policy and Procedure for PCMH1, Element B, Factor 2: Providing timely clinical advice by telephone when the office is not open

POLICY

It is the policy of the clinic to provide access and continuity of care to the patients we serve.

AFTER HOURS CALLS

- All phone calls will be forwarded to answering service for triage.
- Requests for appointments, referrals, or medication refills will be instructed to call back during business hours
- Urgent/Emergent calls will be forwarded to the on-call physician.
- Nurse Care Managers will review the call log daily and address clinical matters.